



## Declaration of Compliance (for family home and centers)

Date: \_\_\_\_\_

Provider Name: \_\_\_\_\_ Provider ID: \_\_\_\_\_

1. I, \_\_\_\_\_ (full name and title) declare I am the licensee or the licensee's authorized agent and voluntarily make this declaration.
2. Pursuant to RCW 43.216.305(2)(b), I declare:
  - I intend to continue to operate a licensed child care facility from the date of this declaration until further notice.
  - or
  - I intend to cease or stop operating my licensed child care facility on the following date \_\_\_\_\_ and I will return my license to DCYF. I understand that by discontinuing the operation of my licensed child care facility, I must reapply for a child care license if I decide to provide child care in the future.
3. Below are the days and hours of operation for my child care program, including closure dates and holiday observances.
  - Days: \_\_\_\_\_
  - Hours: \_\_\_\_\_
  - Closed on these dates/holidays: \_\_\_\_\_

4. Pursuant to RCW 43.216.305 I declare, to the best of my knowledge that I am in compliance with all licensing rules.

5. **FOR FAMILY HOME PROVIDERS:** Pursuant to WAC 110-300-0130, I declare the following are found in unlicensed space at my home:

(Check all that apply)

- Furnace area safety, or smoke or carbon monoxide detector requirements under WAC 110-300-0170(3)
- Guns, weapons, or ammunition storage under WAC 110-300-0165(2)(e)
- Medication storage under WAC 110-300-0215
- Refrigerator or freezer under WAC 110-300-0165(3)(d)
- Storage areas that contain chemicals, utility sinks, or wet mops under WAC 110-300-0260
- Swimming pools under WAC 110-300-0175

I intend to comply with all requirements for those items I have indicated are in unlicensed space at my home.

6. I understand that a person may be subject to penalties under Chapter 9A.72 RCW for making a materially false written statement.

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

DATED and signed at \_\_\_\_\_, Washington on the \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_ (City) (Day) (Month) (Year)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Print Full Name

\_\_\_\_\_  
Telephone & Email Address

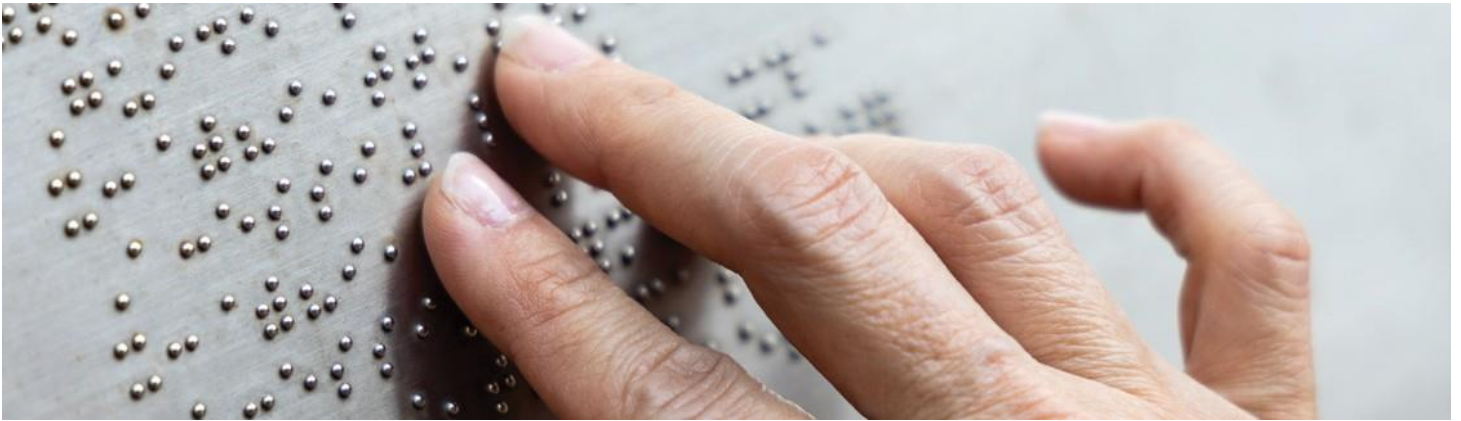
*After DCYF receives this form and uploads it to WA Compass, the form will be shredded.*

### Here are some important regulations to remember:

- An early learning provider must allow parents or guardians access to their child during normal hours of operation, except as excluded by a court order. WAC 110-300-0085(4)(f)
- An early learning provider must communicate verbally or in writing [with a child's parents or guardians]:
  - (i) Changes in drop-off and pickup arrangements as needed; and (ii) Daily activities. WAC 110-300-0085(4)(g)
- If a child suffers from an allergic reaction, the early learning provider must immediately:
  - (a) Administer medication pursuant to the instructions in that child's individual care plan;
  - (b) Contact 911 whenever epinephrine or other lifesaving medication has been administered; and
  - (c) Notify the parents or guardians of a child if it is suspected or appears that any of the following occurred, or is occurring:
    - (i) The child is having an allergic reaction; or
    - (ii) The child consumed or came in contact with a food identified by the parents or guardians that must not be consumed by the child, even if the child is not having or did not have an allergic reaction. WAC 110-300-0186(3)
- At the first opportunity, but in no case longer than twenty-four hours of learning that an enrolled child, staff member, volunteer or household member has been diagnosed by a health care professional with a contagious disease listed in WAC 246-110-010(3), as now and hereafter amended, an early learning provider must provide written notice to the department, the local health jurisdiction, and the parents or guardians of the enrolled children. WAC 110-300-0205(6)
- If an early learning program is served by a private septic system, the septic system must be designed, constructed, and maintained in accordance with state and local health jurisdiction requirements. WAC 110-300-0250(1)
- An early learning provider must notify the department prior to making a change to early learning program space that may impact the health, safety, or welfare of enrolled children. Such changes include but are not limited to:
  - (a) Moving early learning programs to a different, residence, building, or facility (even if the new location is on the same premises);
  - (b) An early learning program altering a planned use of space including, but not limited to, the ages of children served in a room or previously unlicensed areas;
  - (c) Modifying facilities in a way that requires a permit under the Washington state building code or by a local jurisdiction, such as remodeling or renovating early learning program space; and
  - (d) Changing outdoor play areas, such as adding or altering the type of surface or altering stationary climbing or play equipment. WAC 110-300-0402(1)

An early learning provider must submit to the department the new proposed floor plan prior to making changes under subsections (1)(a) through (c) of this section. WAC 110-300-0402(2)

- Licensee, center director, assistant director, or program supervisor must notify the department within thirty calendar days when liability insurance coverage under RCW 43.216.700 has lapsed or been terminated. WAC 110-300-0425(12)
- An early learning provider must notify the department when changes are made to these written policies:
  - Staff policies. WAC 110-300-0110
  - Emergency preparedness plan. WAC 110-300-0470
  - Health policies. WAC 110-300-0500
  - Parent handbook (WAC does not require department notification when changes are made to this document, but DCYF recommends it to ensure any changes to policy meet licensing requirements) WAC 110-300-0450



# Public Notice of Nondiscrimination

## *Notice Of Nondiscrimination On The Basis Of Disability Under The Americans With Disabilities Act Of 1990 And Section 504 Of The Rehabilitation Act Of 1973*

Per the requirements of Title II of the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973, Washington State's Department of Children, Youth, and Families (DCYF) will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

### Effective Communication

DCYF will, upon request, provide appropriate aids and services in order to ensure effective communication for qualified persons with disabilities so they can participate equally in DCYF's programs, services, and activities. Such aids and services may include qualified sign language interpreters, documents in Braille, and other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.

### Modifications to Policies and Procedures

DCYF will make reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to participate in all DCYF programs, services, and activities. For example, individuals with service animals are welcomed in State offices, even where animals are generally prohibited.

### Requesting an Aid or Service to Ensure Effective Communication or a Modification Of Policies

Anyone who requires an auxiliary aid or service for effective communication or a modification of policies or procedures to participate in a DCYF program, service, or activity, should notify one of the below staff members as soon as possible, preferably 48 hours in advance of the scheduled event:

1. A DCYF employee, or
2. The DCYF ADA Coordinator  
**[dcyf.adaaccessibility@dcyf.wa.gov](mailto:dcyf.adaaccessibility@dcyf.wa.gov)**  
Phone: (360) 480-7230, relay users dial 7-1-1

The ADA does not require DCYF to take any action that would fundamentally alter the nature of its programs or services or impose an undue financial or administrative burden.



Washington State Department of  
**CHILDREN, YOUTH & FAMILIES**

## Complaints

Complaints that a DCYF program, service, or activity is not accessible to persons with disabilities should be directed to:

Karin Morris, ADA Coordinator  
Department of Children, Youth, and Families  
1500 Jefferson St., SE  
Olympia, WA 98501  
[dcyf.adaaccessibility@dcyf.wa.gov](mailto:dcyf.adaaccessibility@dcyf.wa.gov)  
Phone: (360) 480-7230  
Washington Relay: 711 or 1-800-833-6384

The State of Washington will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids or services or reasonable policy modifications.

While DCYF has an internal ADA grievance policy, this policy does not in any way prevent an individual with a disability from filing a complaint of disability discrimination with the US Department of Justice's Civil Rights Division for ADA Title II violations, the U.S. Department of Health and Human Services for Section 504 violations, or Washington State's Human Rights Commission.

### US Department of Justice (DOJ), Civil Rights Division

<https://civilrights.justice.gov>

Contact The Department Of Justice  
to Report a Civil Rights Violation online:  
<https://civilrights.justice.gov/report>

To file an ADA Complaint by mail, download the  
ADA Complaint form:  
[www.ada.gov/t2cmpfrm.html](http://www.ada.gov/t2cmpfrm.html)

Send the completed form to:

US DOJ – Civil Rights Division  
950 Pennsylvania Ave, NW  
4CON, 9th Floor  
Washington, DC 20530

### US Department of Health & Human Service, Office of Civil Rights

Civil Rights Complaint filing instructions:  
[www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html](http://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html)

Online HHS - OCR Complaint Portal:  
<https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>

To file a Section 504 of The Rehabilitation Act  
Complaint by mail, download form the Civil Rights  
Discrimination form:  
[www.hhs.gov/sites/default/files/ocr-60-day-frn-cr-crf-complaint-forms-508r-11302022.pdf](http://www.hhs.gov/sites/default/files/ocr-60-day-frn-cr-crf-complaint-forms-508r-11302022.pdf)

Send the completed form to:

Centralized Case Management Operations  
U.S. HHS – 200 Independence Ave., S.W.  
Room 509F HHH Bldg.  
Washington DC 20201

### Washington State Human Rights Commission (WSHRC)

[www.hum.wa.gov](http://www.hum.wa.gov)

To file a Disability Discrimination Complaint related  
to a Public Accommodation by mail, download the  
Public Accommodation Complaint form:

- English version  
[www.hum.wa.gov/sites/default/files/public/complaint-form/PA\\_Credit\\_Insurance\\_Inquiry\\_Form\\_V1.6\\_Fillable.pdf](http://www.hum.wa.gov/sites/default/files/public/complaint-form/PA_Credit_Insurance_Inquiry_Form_V1.6_Fillable.pdf)
- Spanish version  
[www.hum.wa.gov/sites/default/files/public/complaint-form/Cuestionario\\_AP\\_Credito\\_Aseguranza\\_V1.4\\_Rellenable.pdf](http://www.hum.wa.gov/sites/default/files/public/complaint-form/Cuestionario_AP_Credito_Aseguranza_V1.4_Rellenable.pdf)

Send the completed form to:

WSHRC – Olympia Headquarters  
711 S. Capitol Way, Suite 402  
Olympia, WA 98504